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R. WHITE

COVER LETTER

Division of Corporations	
SUBJECT: 1200 Hillsboro Mile, LLC	
(Name of Limited L	Liability Company)
The enclosed member, resignation or dissociation	and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to:
Scott J. Leitten	
(Contact Person)	
Block & Colucci, PA	
(Firm/Company)	
1001 N. US Hwy. One, Ste. 400	
(Address)	
Jupiter, FL 33477	
(City/State and Zip Code)	
For further information concerning this matter, pl	ease call:
Scott J. Leittenat (56174701 Bel-7470110
	Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (2/14)



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LANGE FLORIDA



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

of State is: 12	00 Hillsboro Mile, LLC	s it appears on the records of the Florida Department ssigned to this limited liability company is:
L050000100	•	· · · · · · · · · · · · · · · · · · ·
3. The date this n	nember/manager withdrew/res	signed or will withdraw/resign is: 1/1/2014
4. I, Daniel DeA	ngelis	, hereby withdraw/resign as a
(Print	Name of Person Resigning)	
Manager	~	
	(Print Tule)	
of this limited li		e limited liability company has been notified of my
Signature of I	ssociating Member or Resign	ning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	